

County _____



4-H Cavy Certificate



4-H Member's Name _____

Name of Animal _____

Address _____

Date of Birth (Month/Day/Year) _____

Town _____ Zip Code _____

Sex _____

Phone Number _____

Reg./Tag Number _____

Name of Club _____

Breed _____

Leader's Name _____

Variety (as per ARBA standards) _____

Identification of animal (Specification by ARBA standard) _____

Attach front and bottom view pictures here for identification.

When was animal acquired for 4-H project? (Month/Day/Year) _____

Signature of 4-H Member

Signature of Parent of Guardian

Signature of 4-H Leader

Signature of County Agent Year

Signature of County Agent Year

Signature of County Agent Year

Signature of County Agent Year

Signature of County Agent Year

Signature of County Agent Year



Skamania County

WASHINGTON STATE UNIVERSITY
EXTENSION